

ADCC Name: Hale Hau'oli ADCC

Compliance Manager Name: \

Phone: \

Fax: 877-576-0711

Community Ties of America, Inc
45-955 Kamehameha Highway, Suite 300
Kaneohe, HI 96744

Date of Review: 5/24/16		Last Date items below must be submitted to CTA:	
Check Item	H.A.R. 17-1424 Chapter #	Chapter Heading	Item(s) Required To Meet Compliance
OK	3	Application for Certificate of Approval	
OK	11	Administration	
X	12	Personnel and Staffing	Protective Services 346-335 - Staff members l, l, and l, don't have a current APS/CAN/Fingerprints.
OK	13	Admissions	
OK	14	Participant Fees	
OK	15	Transportation	
OK	16	Services for Center Participants	
OK	17	Physical Location	
OK	18	Fire Protection	
OK	19	Other Disasters and Evacuations	

The CTA Compliance Manager has reviewed the above items with me and has provided me with a copy of this form. It is my responsibility to correct all items listed above and provide proof of same to CTA within the timeframe stated above.

I understand that all items should be submitted to CTA all at one time before the due date.

If this box is checked then I understand that I met all requirements and no corrective action is required

PRINT NAME:

Kathleen Wyatt

SIGNATURE:

Kathleen Wyatt

Date: 5/24/16

Jun 02 16 05:11a

HALE HAU'OLI

Per Rule #346-335, I have sent CommunityTies of America the current APS/CAN/FP for all staff members on June 2, 2016.

I have placed all items with expiration dates (CPR, TB, APS/CAN/FP, Physical) on my computer calendar. I will review this monthly to ensure that all are current.

June 2, 2016
Date

Hale Hau'oli Adult Day Care
98-1247 Kaahumanu Street, Suite 207, Aiea, HI 96701